RECEIPT

COMPANY NAME COMPANY ADDRESS

Receipt Number:	
Date:	
Payment Method: Cash	□ Debit
☐ Credit	☐ Check

		La Credit La Check		
Customer Name: Address:	Telephor Email	Telephone: Email		
Item # Product Description	Qty.	Price per Unit	Cost	
		_		
Return Policy / Comments:		Subtotal		
		Тах		
		Shipping		
		TOTAL		